## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
ESAFund	C C00489856
Check if 24-hour report X 48-hour report New report Amends report file	d on
Full Name of Payee Norway Hill Associates, Inc.	Date of Public Distribution/Dissemination
	09 08 2015
Mailing Address 30 Norway Hill Road	Amount
City State Zip Code	87000.00
Hancock NH 03449	Transaction ID : SE.6341 Date of Disbursement or Obligation
Purpose of Expenditure direct voter contact Category/ Type	07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
Kelly A. Ayotte Oppose	President State: NH State:
Calendar Year-To-Date Per Election for Office Sought  Dist 2016	oursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
	, tinodit
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	oursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	87000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	87000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Nancy H. Watkins  [Electronically Filed] Date	09 08 7 2015
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